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PETERSFIELD RURAL DISTRICT COUNCIL.

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

and

CHIEF SANITARY INSPECTOR

for the year

1 9 5 4.

PETERSFIELD RURAL DISTRICT COUNCIL.

A N N U A L R E P O R T.

of the

MEDICAL OFFICER OF HEALTH

and

CHIEF SANITARY INSPECTOR

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THE RURAL DISTRICT COUNCIL OF PETERSFIELD.

Chairman of the Council:

Mr. A.J. Allee, J.P.,

Vice-Chairman of the Council:

Mr. W.A. Coyte.

Chairman of the Public Health Committee:

Sir Hugh Cocke.

Members of the Council:

Mr. W.A. Allam.
Mr. A.J. Allee, J.P.,
Mrs. T.H. Barnsley.
Lady Doris Blacker.
Mr. W.H. Blake.
Capt. M. Turner-Bridger.
Mr. G.P. Brutton.
Sir Hugh Cocke.
Mr. H. Newman Collard.
Mr. W.A. Collins.
Capt. A.F. Coryton, J.P.
Mr. W.A. Coyte.
Mr. J.S.G. Crosland.
Mr. A.G. Edney.
Mr. I. Fry.

Mr. H. Heath.
Lady Jaffray.
Mr. T.J. Marsh.
Mr. A.H. Moore.
Admiral A.J.L. Murray, C.B., D.S.O., O.B.E.,
Rear Admiral R.G. Murray.
Mr. C.A.T. Olding.
Mr. H.H.C. Oram.
Admiral E.G. Robinson, V.C., O.B.E.,
Mr. S.B. Selmes.
Capt. C.A. Shove.
Mrs. M.E. Smith.
Miss W. Stubington.
Mr. H.C. Swayne.
Mr. M.J. Tosdevine.

Members of Health Department Staff.

Medical Officer of Health:

S. Chalmers Parry, M.A.Cantab., M.R.C.S., L.R.C.P., D.P.H.

Chief Sanitary Inspector:

A. Swan, A.R.San.I., M.S.I.A.

Additional Sanitary Inspector:

L.R. Devenish, A.R.San.I., M.S.I.A.

Assistant Sanitary Inspector:

W. Bell, A.R.San.I., M.S.I.A., (to 30th April, 1954.)
C.C.G. Guy, Cert.S.I.B., (from 1st June, 1954.)

Clerks:

V.W.H. Denman.
Miss C.J. Wedge.

RURAL DISTRICT COUNCIL OF PETERSFIELD.

The Old College,
Petersfield.

To the Chairman and Members
of the Petersfield Rural District Council.

I have the honour to present the Annual Report for the year ending 31st December, 1954 on the health and sanitary conditions of the Rural District of Petersfield.

It is gratifying to report that the death rate was 9.0, the lowest on record for this district. The corresponding figures for 1952 and 1953 were 9.7 and 9.1 respectively, and they were also the lowest death rates for the district.

There were no deaths from infectious disease; and, apart from measles and whooping cough, very little infectious disease occurred throughout the year.

No case of diphtheria was notified during the year. Parents are again reminded that children should be immunised before their first birthday and should receive their first supplementary injection preferably just before reaching school age.

The Minister of Food has made "Winchester and district", which includes this area, a "Specified Area" in which designated milk only may be sold.

As a result of proceedings taken against a local farmer for alleged offences against the Hop Pickers' Accommodation byelaws in November, 1953, these byelaws have been amended by the Minister of Housing and Local Government to include "tents" within the scope of the byelaws.

I should like to take this opportunity of thanking you all for your support and encouragement; and I am grateful to the officers of other departments for their willing help and co-operation.

I also wish to record my appreciation of the efficient and conscientious work carried out by Mr. Swan and the members of the Staff.

S. CHALMERS PARRY.
Medical Officer of Health.
Petersfield Rural District Council.

LEGISLATION.

During the year, the following legislation affecting the Public Health Department was enacted:-

1. Housing (Improvement Grant)(Expenses)Regulations, 1954.

These regulations which came into force on the 21st April, 1954, varied the limits of the cost of work qualifying for grant to £800 as the upper limit and £100 as the lower limit.

2. Housing Repairs and Rents Act, 1954.

This Act came into force on the 30th August, 1954. It required local authorities to submit to the Minister by the 30th August, 1955, their proposals for dealing with slum properties. The Act also set out a new "Standard of Fitness" and contained miscellaneous amendments of the Housing Acts. Part II dealt with repairs increases in respect of controlled dwelling houses and other amendments of the Rents Act.

3. The Rent Restrictions Regulations, 1954.

4. Housing Repairs (Increase of Rent) Regulations, 1954.

These regulations came into force on the same day as the Act under which they were made. They refer principally to prescribed forms.

5. The Milk (Special Designations)(Specified Areas)(No. 2) Order, 1954.

This Order brought into effect the provisions of subsection 19 of the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, relating to the compulsory use of special designations for retail sales of milk in the area.

The Order came into force on the 31st October, 1954.

6. Slaughterhouses Act, 1954.

This Act came into force on the 5th July, 1954. Its principal provision was to make local authorities responsible for securing that adequate slaughterhouse facilities were available in their districts. It also dealt with licensing, closure and compensation.

7. Slaughter of Animals (Pigs) Act, 1953.

This Act, which came into force on the 1st July, 1954, requires that pigs over the age of twelve weeks which are slaughtered elsewhere than in a slaughterhouse or knacker's yard shall be instantaneously slaughtered or be stunned and thereby rendered insensible to pain until dead and that the slaughter or stunning shall be effected by means of a mechanically-operated instrument in proper repair.

8. Slaughter of Animals (Amendment) Act, 1954.

This Act deals with the licensing of premises used for the slaughter of horses and all premises used for the confining of animals awaiting slaughter. It empowers the Minister of Food to make regulations for securing humane conditions and practices in connection with the slaughter of animals at slaughterhouses and knackers' yards.

Section 3 provides that licences granted to slaughtermen must in future (except in the case of animals slaughtered for food for Jews or Mohammedans), specify the kind of animals which may be slaughtered by the holders of the licences and the types of instrument which may be used. The period for which a licence may be granted cannot now exceed one year.

The Act came into force on the 1st October, 1954.

LEGISLATION (continued).

9. The Slaughter of Animals (Prevention of Cruelty)(No.2.) Regulations, 1954.

The Regulations which are made under section 2 of the Slaughter of Animals (Amendment) Act, 1954, are designed to secure humane conditions and practices in connection with the slaughter of animals at slaughterhouses and knackers' yards.

10. The Public Health (Aircraft)(Amendment) Regulations, 1954.

These Regulations extend to the armed forces of other countries exemption from the Public Health (Aircraft) Regulations, 1952.

STATISTICS OF THE AREA.

Area 54,497 acres.

Rateable Value (1954/55) £135,711.

Sum represented by a penny rate (1954/55) £528.

Approximate number of inhabited houses 6053.

"Home" Population (based on Registrar General's final figures from Census) Mid 1954 22,120.

The full analysis by the General Register Office of the 1951 Census figures are now available and are reproduced below:-

PARISH	Acreage (Land and Inland Water).	POPULATION.				
		1931	1951			
		Persons	Persons	Males	Females	Persons per Acre
Bramshott.	6,330	3,163	5,244	2,621	2,623	0.83
Buriton.	5,228	684	734	366	368	0.14
Clanfield.	2,769	663	1,205	583	622	0.44
Colemore and Priorsdean.	3,068	169	160	82	78	0.05
East Meon.	8,823	908	1,490	914	576	0.17
Froxfield.	6,188	865	868	430	438	0.14
Greatham.	1,243	406	435	207	228	0.35
Hawkley.	2,207	460	456	216	240	0.21
Horndean.	5,108	2,090	3,650	1,751	1,899	0.71
Langrish.	2,411	231	308	139	169	0.13
Liss.	3,657	2,517	2,908	1,318	1,590	0.80
Rowlands Castle.	6,301	1,504	4,220	2,066	2,154	0.67
Steep.	3,056	757	800	381	419	0.26
TOTALS	56,389	14,417	22,478	11,074	11,404	0.40

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

The district surrounds a pleasant market town in the extreme east of Hampshire. It has a common boundary with Surrey and Sussex extending from Bramshott Chase in the north to Twostone Bottom on the Emsworth Common road in the south, a total of over twenty-four miles.

The area comprises thirteen parishes, five of which are partly provided with main drainage.

There are three parishes with a population of over 3,000 and their villages form the main centres of population.

The whole district is well known as a residential resort, not only for its fine scenery, but also for the hamlets and villages which have retained their character through the years.

The South Downs form a natural division between the north and the south, but travel is not unduly restricted on this account as both the main London-Portsmouth road and rail services link Petersfield with the coastal area.

Agriculture is the main industry and in some parishes forms the only interest. With farming can be associated fruit growing and hop growing. The seasonal harvesting of crops calls for a concentrated labour force and this is provided to a large extent by people who follow a gipsy way of life and by town dwellers who look upon it as a profitable holiday.

Employment is provided chiefly by way of building and allied trades, transport work, shop keeping, clerical work and by professional and personal services. There are also a few small factories and the tendency is towards a slight increase in the numbers employed in light industry. Many of the residents in the south of the district work at Portsmouth, the chief source of employment being naval establishments, and a service stores depot in Liphook absorbs a considerable proportion of the labour force over a wide area.

VITAL STATISTICS.

Births.

	<u>1954.</u>			<u>1953.</u>		
	M	F	Total	M	F	Total
Live Births (Legitimate)	155	137	292	154	126	280
(Illegitimate)	8	6	14	8	7	15
Total Live Births			<u>306</u>			<u>295</u>

Live Birth rate per 1,000 of the estimated population was 13.8 compared with 15.2 for the whole of England and Wales.

	<u>1954.</u>			<u>1953.</u>		
	M	F	Total	M	F	Total
Still Births (Legitimate)	6	1	7	7	5	12
(Illegitimate)	-	1	1	1	-	1
Total Still Births			<u>8</u>			<u>13</u>

Still Birth rate per 1,000 total (live and still) births was 26.1 compared with 24.0 for the whole of England and Wales.

Deaths.

	<u>1954.</u>			<u>1953.</u>		
	M	F	Total	M	F	Total
From all causes	104	96	200	113	89	202

Death rate per 1,000 estimated population was 9.0 compared with 11.3 for the whole of England and Wales.

Maternal Mortality.

Pregnancy, childbirth, abortion 1

Maternal Mortality rate per 1,000 total (live and still) births. 3.2

Infant Mortality (deaths under one year).

	<u>1954.</u>			<u>1953.</u>		
	M.	F.	Total	M	F	Total
Legitimate	1	5	6	5	4	9
Illegitimate	1	1	2	-	-	-
Total Infant Deaths			<u>8</u>			<u>9</u>

Infant Mortality Rate.

The number of deaths of infants under the age of one year per 1,000 live births, is known as the infant mortality rate for that year.

This rate for each calendar year is not regarded as a reliable guide, for the number of births in the District is insufficient to be of significance statistically.

But, if this rate is taken over a period of five years, it is then considered reasonably reliable and one of the best indices of the social circumstances of the district. High rates are commonly associated with overcrowding and defective sanitation.

It is therefore satisfactory to report that, during the past fifteen years, the quinquennial rates for this district have been considerably lower than the figures for the country as a whole.

The following table shows the rate for the district as compared with the rate for England and Wales, each over a five year period:-

Infant Mortality Rates (per 1,000 Live Births).		
Year.	Petersfield Rural District.	England & Wales
1938.	53.3	55.2
1939.	50.2	55.4
1940.	45.6	53.6
1941.	39.6	52.8
1942.	42.5	52.0
1943.	43.6	50.0
1944.	43.7	46.0
1945.	43.5	45.0
1946.	40.0	42.0
1947.	31.1	39.2
1948.	27.5	35.9
1949.	27.8	33.3
1950.	22.6	30.6
1951.	23.8	29.1
1952.	24.9	27.8

The infant mortality rate for the year under review was 26.1 compared with 25.5 for England and Wales.

In 1953 the rate for the District was 30.5 compared with 26.8 for the country as a whole.

Causes of Death.

	Male	Female	Total
1. Tuberculosis of Respiratory System	2	-	2
2. Other forms of Tuberculosis.	-	-	-
3. Syphilis.	-	-	-
4. Diphtheria.	-	-	-
5. Whooping Cough.	-	-	-
6. Meningococcal Infections.	-	-	-
7. Acute Poliomyelitis.	-	-	-
8. Measles.	-	-	-
9. Other Infective and Parasitic Diseases.	-	1	1
10. Malignant Neoplasm, Stomach.	2	4	6
11. " " Lung, Bronchus.	6	3	9
12. " " Breast.	-	2	2
13. " " Uterus.	-	4	4
14. Other Malignant & Lymphatic Neoplasms.	13	7	20
15. Leukaemia, Aleukaemia.	-	-	-
16. Diabetes.	2	-	2
17. Vascular Lesions of Nervous System.	8	17	25
18. Coronary Disease, Angina.	19	9	28
19. Hypertension with Heart Disease.	3	2	5
20. Other Heart Disease.	20	21	41
21. Other Circulatory Disease.	9	2	11
22. Influenza.	-	1	1
23. Pneumonia.	1	3	4
24. Bronchitis.	1	2	3
25. Other Diseases of Respiratory System.	-	2	2
26. Ulcer of Stomach and Duodenum.	1	-	1
27. Gastritis, Enteritis and Diarrhoea.	1	1	2
28. Nephritis and Nephrosis.	-	2	2
29. Hyperplasia of Prostate.	1	-	1
30. Pregnancy, Childbirth, Abortion.	-	1	1
31. Congenital Malformations.	2	2	4
32. Other Defined and Ill-defined Diseases.	10	9	19
33. Motor Vehicle Accidents.	1	-	1
34. All other Accidents.	1	1	2
35. Suicide.	1	-	1
36. Homicide and Operations of War.	-	-	-
	104	96	200

GENERAL PROVISION OF HEALTH SERVICES

FOR THE AREA.

Laboratory Facilities.

Bacteriological work is carried out by the Public Health Laboratory at the Royal Hampshire County Hospital, Winchester, (Telephone, Winchester 3807) and specimens of clinical materials (sputum, swabs, etc) and samples of water, milk and foodstuffs are sent for bacteriological examination to Dr. H.T. Findlay, Director of the Public Health Laboratory.

Some specimens in connection with cases of infectious diseases, which have been admitted to the Portsmouth Infectious Diseases Hospital, are sent for bacteriological examination to Dr. K. Hughes, Director of the Public Health Laboratory, Milton, Portsmouth (Telephone, Portsmouth 74785).

The laboratories are not open on Saturday afternoons, but some of the staff attend on Sundays from 10 a.m. to 12 noon.

Samples may be deposited in the sample box placed outside the Public Health Laboratory, Winchester, or they may be left at the Porter's Lodge of the Infectious Diseases Hospital, Portsmouth, at any time.

Samples for chemical analysis are sent to the City Analyst, Portsmouth (Telephone, Portsmouth 5482).

The Public Analyst for the area is Mr. A.P. Davson, Public Health Laboratory, Public Health Centre, Grange Road, Bermondsey, S.E.1.

Ambulance Facilities.

All applications for the use of ambulances should be directed to the Ambulance Officer, Fareham (Telephone, Fareham 2170) who arranges for the most conveniently situated ambulance to attend.

The use of the Hospital Car Service may also be obtained through the Ambulance Officer (Telephone, Fareham 3626).

Smallpox cases (suspected or confirmed) requiring transport to hospital will be conveyed by the County Ambulance Service by arrangements made through the Bed Admissions Office (Telephone, Winchester 2261).

Nursing in the Home.

The names of District Nurses, Midwives and Health Visitors, who practise in the district under the direction of the County Medical Officer, are shown in the following table:-

Names and Addresses of Nurses.	District served.	Names of Health Visitors.
Miss F.A. Vickers, S.R.N., S.C.M., (Queen's Nurse). Nurse's Cottage, Headley Road, Liphook. (Tele: Liphook 3179).	Bramshott. Liphook. Conford. Passfield. Hammer.	Miss V. Gawthorpe, S.R.N., S.C.M., R.S.I. Certificate.
Miss K. Bagley, S.R.N., S.C.M., (Queen's Nurse), Moss Cottage, Western Road, Liss. (Tele: Liss 3139)	Greatham. Liss. Empshott.	
Mrs. J.M. Beaton, S.R.N., S.C.M., (Queen's Nurse) 1 Privett Road, High Cross, Froxfield. (Tele: Hawkley 43)	Colemore. Priorsdean. Privett. Hawkley. Oakshott. Froxfield.	
Miss E.F. Moore, S.C.M., 16 Glenthorne Meadow, East Meon. (Tele: East Meon 63)	East Meon.	Mrs. C.E. Foster, S.R.N., S.C.M., A.R.San.I., R.S.I. Certificate.
Miss B.E. Bloomfield, S.C.M., 20 Burnt Ash Cottages, Steep Marsh, Petersfield. (Tele: Petersfield 676)	Langrish. Stroud. Steep. Sheet. N. Petersfield.	
Mrs. M.C. Lapper, S.R.N., S.C.M., (Queen's Nurse), 22 Queen's Road, Petersfield. (Tele: Petersfield 628)	Ramsdean. S. Petersfield. Buriton.	
Miss J.E. Bramidge, S.R.N., S.C.M., (Queen's Nurse), Rustlings, 106 Catherington Lane, Horndean. (Tele: Horndean 2276)	Catherington. Clanfield. Hogs Lodge.	Miss B.G. Osborn, S.R.N., S.C.M., R.S.I. Certificate, Orthopaedic Nursing Certificate.
Mrs. E. Wiggett, S.R.N., (Queen's Nurse), 2 Pampas Cottages, South Lane, Clanfield. (Tele: Horndean 2219)	Horndean. Lovedean. Blendworth.	Mrs. M. Fitzgerald, S.R.N., S.C.M., R.S.I. Certificate.
Miss J.E. Bramidge, S.R.N., S.C.M., (Queen's Nurse), Rustlings, 106 Catherington Lane, Horndean. (Tele: Horndean 2276).	Chalton. Rowlands Castle. Redhill. Idsworth. Finchdean.	Miss M.E. Hunt, S.R.N., S.C.M., R.S.I. Certificate.

✱ Midwifery only.

♢ General Nursing only.

Home Help Service.

The office of Mrs. Drake, the Divisional Organiser of the Home Help Service is situated at the rear of the Town Hall, Petersfield, (Telephone, Petersfield 771, extension 18). The office is open Monday to Friday, 9 a.m. to 1 p.m. and applications for Home Help should be made direct to this office. When office is closed, messages can be left at The Town Hall Enquiry Office.

Clinics.

The following Clinics are held at The County Council Health Centre, 1 Ramshill, Petersfield:-

* Ophthalmic Clinic	By appointment.
* Orthopaedic Remedial Clinic	1st Tuesday mornings and other Tuesday afternoons by appointment.
Child Welfare Centre	Wednesday mornings and afternoons.
School Clinic	Friday mornings. (Medical Officer attends 1st Friday only).
Dental Clinic	By appointment.
Speech Therapy Clinic	By appointment.

Child Welfare Centres.

The following Child Welfare Centres in the Rural District are open for children under five years of age:-

Centre	Hall	Afternoons
Clanfield	Memorial Hall.	1st Friday
East Meon	Institute Hut.	1st and 3rd Thursdays.
Froxfield	King George V Memorial Hall.	2nd Tuesday.
Horndean	Nash Memorial Hall.	2nd and 4th Tuesdays.
Liphook	Church Room.	1st and 3rd Tuesdays.
Liss	Village Hall.	2nd and 4th Fridays.
Rowlands Castle	Parish Hall.	3rd Friday.
Superior Camp	Social Club Hall.	3rd Friday.

The following eight centres, situated in adjoining districts, are available for children living near the boundaries of the district:-

Centre	Hall	Afternoons
Alton	Assembly Rooms.	Every Tuesday.
Bedhampton	St. Thomas' Church Hall, Belmont Park.	1st and 3rd Tuesdays.
Grayshott	Village Hall.	1st Friday.
Havant	County Council Health Centre, 4 Park Way.	2nd and 4th Tuesdays.
Headley	Village Hall.	2nd and 4th Fridays.
Petersfield	Health Centre, 1 Ramshill.	Every Wednesday. (morning and afternoon)
Stockheath	St. Francis Church Hall, Riders Lane, Leigh Park.	Every Friday.
Waterlooville	St. George's Hall.	2nd and 4th Thursdays.

The work of the voluntary helpers, who assist the medical staff at the Welfare Centres, is greatly appreciated.

Ante-natal Clinics.

The following Ante-natal Clinics are held in the district:-

Centre	Hall	Day of month when held at 2.0 p.m.
Liss	British Legion Hall.	1st Thursday and 3rd Wednesday.
Liphook	Church Room, Portsmouth Road.	1st Friday

The following Ante-natal Clinics, situated in adjoining districts are also available:-

Centre	Hall	Day of month when held.
Alton	General Hospital.	Every Thursday except the 5th in the month at 2.0 p.m.
Havant	County Council Health Centre, 4 Park Way.	1st, 2nd, 3rd and 4th Mondays at 2.0 p.m.

* Tuberculosis Clinics.

Queen Alexandra Hospital, Cosham, (Telephone. Cosham 79451, Ext. 58).

Wednesday. 9.45 a.m. Old patients by appointment.
2.0 p.m. New patients.

Thursday. 9.45 a.m. Old patients by appointment.
2.0 p.m. Refills.

One evening session on first Thursday in the month by appointment.
Dr. Butterworth, the Chest Physician, is in attendance.

Royal Hants County Hospital, Winchester.

Thursday. 1.30 p.m. Refills.

Dr. H.S. Fraser, the Chest Physician, is in attendance.

Health Department, The Castle, Winchester.

Wednesday. 10.0 a.m. Old patients.
2.30 p.m. New patients.

Thursday. 9.30 a.m. Patients by appointment.

Northfield Hospital, Redan Road, Aldershot.

Tuesday. 11.15 a.m. New patients.

* Venereal Diseases.

Treatment is available at the following hospitals:-

Guildford - Royal Surrey County Hospital.

Males : 5.0 p.m. to 7.0 p.m., Tuesdays and Fridays.

Females : 2.0 p.m. to 7.0 p.m., Mondays.

9.30 a.m. to 11.0 a.m., Thursdays.

Portsmouth - St. Mary's Hospital.

Males : 10.0 a.m. to 12.0 noon, }
5.0 p.m. to 7.0 p.m., } Tuesdays and Thursdays.

Females : 5.0 p.m. to 7.0 p.m., Mondays.

2.0 p.m. to 4.0 p.m., Wednesdays.

10.0 a.m. to 12.0 noon., Fridays.

Winchester - Royal Hants County Hospital.

Males : 10.0 a.m., Saturdays.

Females : 2.0 p.m., Tuesdays.

SCHOOL HEALTH SERVICES.

* Orthopaedic Clinics.

Orthopaedic cases, requiring treatment, are referred through the Lord Mayor Treloar Hospital, Alton, to the following Clinics:-

Alton.

Surgeon's Clinic held at Lord Mayor Treloar Hospital, on fourth Tuesdays, odd months, at 10 a.m., and on Mondays at 2.0 p.m. by appointment.

Remedial Clinic held at Lord Mayor Treloar Hospital, every Thursday all day.

Havant.

Surgeon's Clinic, held at County Council Health Centre, on fourth Tuesdays, even months, at 10 a.m.

Minor Clinic, held at County Council Health Centre, on second Wednesday of each month, at 10 a.m.

Remedial Clinic, held at County Council Health Centre, every Wednesday at 10 a.m. and 1.30 p.m.

Petersfield.

Remedial Clinic, held at County Council Health Centre, Ramshill, first Tuesday, at 10.0 a.m., other Tuesdays at 1.30 p.m.

* Ophthalmic Clinics.

Ophthalmic Clinics are held for school and pre-school children at the following places; attendance by appointment through the County Medical Officer:-

Havant.

Held at County Council Health Centre, Park Way.

Petersfield.

Held at County Council Health Centre, Ramshill.

* Orthoptic Clinic.

Cases selected by the School Oculist, are referred to the Eye and Ear Hospital, Portsmouth.

* Ear, Nose and Throat Clinics.

Cases, referred for specialist advice, are examined at the Portsmouth Eye and Ear Hospital and treatment is carried out either at that Hospital or at Petersfield Hospital.

In the northern part of the area, cases are examined and treatment carried out at the Haslemere Hospital or Guildford Hospital.

School Clinic.

This is held at the County Council Health Centre, Ramshill, Petersfield, on Friday mornings.

The Health Visitor attends every Friday morning until noon; the Medical Officer is in attendance on the first Friday of the month.

Speech Therapy Clinics.

Cases attend at the County Council Health Centre, Ramshill, Petersfield, on Thursdays at 1.30 p.m., by appointment through the County Medical Officer.

Clinics are also held at the County Council Health Centres at Park Way, Havant and Trafalgar Street, Winchester, by appointment through the County Medical Officer.

Child Guidance Clinic.

Cases are seen by appointment through the County Medical Officer, at the County Health Centre, Ramshill, Petersfield.

Verminous Cleansing Clinics.

Arrangements can be made for the treatment of special cases, by appointment, at the County Council Health Centre, Ramshill, Petersfield.

Dental Clinics.

These are held at the County Council Health Centres at Petersfield and Havant, and at schools and other premises as and when required. A Dental Clinic Trailer is available for use in the area.

Family Planning Association Clinics.

The following Clinics, which are run on a voluntary basis, give advice on family planning as this is not a service available under the National Health Service.

A lady Doctor and Sister are in attendance:-

ADDRESS	DAY	TIME
<u>COSHAM.</u> Child Welfare Centre, Northern Road.	Wednesday.	1.0 - 3.30 p.m.
<u>PORTSMOUTH.</u> Trafalgar Place, Clive Road, Fratton.	Tuesdays.	1.0 - 3.30 p.m.
	Fridays.	7.0 - 9.0 p.m.
<u>WINCHESTER.</u> The Hut (adjoining Trafalgar House) Trafalgar Street.	2nd and 4th Tuesdays.	2.0 - 3.0 p.m.

Any further information can be obtained from the County Medical Officer.

It is desirable that the woman should, at her first attendance, take to the Clinic a letter from her own doctor.

■ These services are the responsibility of the Regional Hospital Board.

HOSPITALS.

General.

There are six General Hospitals available for the admission of patients from the district:-

HASLEMERE AND DISTRICT HOSPITAL.

(Telephone, Haslemere 894).

PETERSFIELD GENERAL HOSPITAL.

The Petersfield hospital (Telephone, Petersfield 19) has twenty-eight beds available for medical and surgical cases.

It is administered by the Portsmouth Group Hospital Management Committee.

ROYAL SURREY COUNTY HOSPITAL.

(Telephone, Guildford 2323).

ST. MARY'S HOSPITAL, PORTSMOUTH.

(Telephone, Portsmouth 2476).

THE ROYAL PORTSMOUTH HOSPITAL, PORTSMOUTH.

(Telephone, Portsmouth 2103).

THE ROYAL HAMPSHIRE COUNTY HOSPITAL, WINCHESTER.

(Telephone, Winchester 5151).

Heathside Hospital, Petersfield.

This Institution is controlled by the Portsmouth Group Hospital Management Committee and is available for chronic sick patients.

Maternity Cases.

The Grange Nursing Home, Liss, and Northlands Maternity Home, Emsworth, are available for maternity cases.

Few applications are made to the Group Maternity Clerk working at St. Mary's Hospital, Portsmouth; the great majority continue to be made to the County Medical Officer who arranges for a home visit by the District Nurse.

Infectious Diseases.

There is no infectious diseases hospital in the district.

Any infectious diseases hospital is now available for the admission of cases occurring in the district. Patients are generally admitted to Portsmouth Infectious Diseases Hospital, Milton Road (Telephone, Portsmouth 2046) which is under the control of the Regional Hospital Board.

Special arrangements have been made for the admission of children suffering from acute poliomyelitis to Lord Mayor Treleear Hospital, Alton (Tele: Alton 2238).

Sanatoria.

Sanatoria for patients, who are suffering from Tuberculosis, are provided by the Regional Hospital Board.

Smallpox.

The Regional Hospital Board makes provision for the treatment of cases of smallpox at Crabwood Smallpox Hospital. The Bed Admissions Office, (Telephone, Winchester 2261) deals with the admission of these patients.

PREVALANCE OF, AND CONTROL OVER, INFECTIOUS

AND OTHER DISEASES.

Notifiable Diseases.

Particulars of cases of Infectious Diseases which were notified during the year and comparative notification rates for the whole of England and Wales, are shown in the following table:-

Diseases	Total Cases Notified.	Rate per 1,000 of the Estimated Population.	
		Petersfield R. D.	England and Wales
Scarlet Fever	4	0.18	1.10
Pneumonia	1	0.04	0.66
Erysipelas	3	0.13	0.13
Measles	12	0.54	2.38
Whooping Cough	29	1.31	2.52
Puerperal Pyrexia	1	0.04	0.28

An analysis of the total notified cases according to age groups is given below:-

Age Group	Scarlet Fever	Measles	Whooping Cough	Pneumonia	Puerperal Pyrexia	Erysipelas.
Under 1 year	-	-	3	-	-	-
1 - 2 years	-	1	2	-	-	-
2 - 3 years	1	1	5	-	-	-
3 - 4 years	-	2	5	-	-	-
4 - 5 years	-	1	2	-	-	-
5 - 10 years	3	6	12	-	-	-
10 - 15 years	-	1	-	-	-	-
15 - 20 years	-	-	-	-	-	-
20 - 35 years	-	-	-	1	1	1
35 - 45 years	-	-	-	-	-	-
45 - 65 years	-	-	-	-	-	2
Over 65 years	-	-	-	-	-	-

Only certain forms of pneumonia are notifiable.

The following table shows the number of cases of infectious disease notified during the year and the parishes in which they occurred: -

Parish	Scar- let Fever	Meas- les	Whooping Cough	Pneu- monia	Puerperal Pyrexia	Erysip- elas.
Bramshott	-	10	3	-	-	-
Buriton	-	-	4	-	-	-
Clanfield	-	-	2	-	-	-
Colemore & Priorsdean	-	-	-	-	-	-
East Meon	-	-	2	-	-	-
Froxfield	-	-	4	-	-	-
Greatham	-	-	-	-	-	-
Hawkley	-	-	-	1	-	-
Horndean	3	-	2	-	-	-
Langrish	-	-	-	-	-	-
Liss	-	1	6	-	1	2
Rowlands Castle	1	1	-	-	-	-
Steep	-	-	6	-	-	1
Totals	4	12	29	1	1	3

The usual analysis of Scarlet Fever cases according to Parishes has not been included as there were only four cases during the year (Horndean 3 and Rowlands Castle 1).

Food Hygiene.

The increase in food poisoning outbreaks during the past few years has been attributed in the main to the greater amount of communal feeding in the country. For it will be appreciated that, in the home, the consumption of any food, that has been dangerously contaminated, will effect only the family; whereas in a canteen, restaurant or café, hundreds of people may be affected simultaneously.

Apart from the risk of food poisoning, the very thought of eating food with dirty utensils or of eating any food, that has been handled by someone with dirty hands, is most objectionable.

Any food handler, infected with diarrhoea or with septic sores or boils, should not be allowed to handle food. It should constantly be borne in mind by all concerned in the handling, preparation and storage of food - and particularly by those who work in canteens or who serve food to large numbers - that the utmost care must be taken to obviate the risk of food poisoning, which may occur, even in the best equipped of canteens.

A high standard of hygiene is a benefit to food traders, for it attracts business; whereas a low hygienic standard will obviously have the reverse effect.

Everyone has now become more clean food minded; and if any uncleanness is observed in food premises, the customers generally complain to the management.

continued over/.....

Food Hygiene (continued).

This new look in food hygiene is a good thing, as it is of course all in the interest of the general public to encourage safer practices.

The hygiene standard of such shops and restaurants therefore lies to some extent in the hands of the customers.

The washing of hands immediately after using the lavatory is absolutely essential for everybody, for toilet paper is porous; and, once contaminated, the hands will leave bacteria behind on everything they touch.

Cakes, boiled sweets, cooked food and vulnerable foods should be handled by tongs or servers and not fingered by the hands, for they are never clean enough to safely handle food of this nature.

In fact, the occupation of those concerned in the preparation and serving of food should be called "food non-handling".

Vulnerable foods - which include pressed meat, brawn, meat pies, stews, trifles, custards and synthetic cream - are normally quite safe when prepared. But they act as ideal breeding grounds for any dangerous germs that gain access; and, if kept at warm temperatures, the germs will multiply very rapidly.

Made-up meat dishes and other vulnerable foods are easily contaminated and provide a perfect medium for the growth and multiplication of bacteria.

Refrigeration conserves food in a wholesome and palatable condition and definitely retards the growth of bacteria if they are present.

Many outbreaks of bacterial food poisoning would never have occurred if the incriminated food, after being cooked, had been rapidly cooled and then placed in a refrigerator until actually required, instead of being left at room temperature overnight and then eaten cold, or warmed up the next day.

But emphasis should rightly be placed on methods of preventing the food from becoming contaminated in the first place.

However, it is most important that vulnerable food should be stored at a low temperature in a refrigerator or a cool larder to prevent the germs from multiplying.

The food must be at certain temperature and moisture conditions over a period of time before the food poisoning organisms will multiply and produce food poisoning.

A high standard of hygiene for food traders is best obtained by observing the following simple rules:-

- (1) Protection of food from all sources of contamination (dust and droplet infection as well as from flies, cockroaches, rats and mice).
- (2) Personal cleanliness of "food non-handlers".
- (3) Proper storage and display of food at safe temperature.

Education in Food Hygiene.

The Central Council for Health Education has continued to keep this Department informed of all their up-to-date posters and pamphlets relating to food hygiene and the control of infectious disease.

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Education in Food Hygiene (continued).

In the Chief Medical Officer's last Annual Report (for the year 1953), attention was drawn to the fact that the number of incidents of food poisoning recorded in 1953, was higher by fifty per cent than in 1952.

In view of the publicity given in the last few years to the need for hygienic practice in the preparation of food, this is disappointing and emphasises the need to keep the importance of food hygiene before the public eye.

The remedy is largely in the hands of those who prepare, cook and serve food, and, to encourage good habits of personal hygiene among members of the staff of catering establishments, house-wives and others, the Ministry of Health has prepared four illustrated coloured posters, which cover the four essentials of a good food handler:-

- (1) "Wash your hands well".
- (2) "Finger food as little as possible".
- (3) "Cover all cuts and sores properly".
- (4) "Cover food against flies".

Vaccination.

The National Health Service Act left the question of vaccination entirely to the good sense and discretion of the parents.

It was hoped that the voluntary response would be as successful as in the case of diphtheria immunisation.

Strange as it may seem, however, this has not been the case; and the vaccination state of the population in Great Britain, which has in the past few years been consistently falling, is now at such a low level as to cause concern.

In England and Wales in 1954, the percentage of infants under the age of one year who were vaccinated was only 34.5. This is far below what may be regarded as satisfactory; the aim should be to see that every healthy infant is vaccinated - not only because routine infant vaccination is thought to be justified as the first step in establishing a satisfactory immunity in later years, but also on account of the immediate protection thereby conferred, and the occurrence of outbreaks of imported smallpox from time to time only confirms that the general immunity against this disease is not sufficient to prevent an epidemic.

It is therefore all the more important that primary vaccination should be carried out.

Vaccination is far too frequently refused because parents are under the impression that it will harm their babies.

If the first vaccination is put off until adolescence or later, there may be a very slight risk; but that is, of course, all the more reason for vaccinating the child in infancy - especially in these days when people travel abroad so much more and any young man may be sent, during his National Service training, to a smallpox infected area.

The ideal time for the first vaccination is during the first six months of infancy - preferably about the third or fourth month.

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Vaccination (continued).

The susceptibility of the community as a whole to epidemic smallpox of either the mild or the severe variety cannot be greatly diminished by routine infant vaccination alone. To guard against the social disruption and economic loss which invariably results from the rapid spread of any form of smallpox, it is necessary for the re-vaccination of school children as well as vaccination of infants to be done as a routine.

The re-vaccination of children within two or three years of first entering school not only maintains or revives their individual protection, but is likely to facilitate substantially the control of local outbreaks of smallpox. It also ensures that any further vaccination in later life will be less likely to have any serious reactions or complications.

Re-vaccination, done at school age, is practically trouble free and this procedure, carried out as a routine at least once on all children primarily vaccinated in infancy, would substantially diminish the chances of rapid spread of smallpox.

The Chief Medical Officer of the Ministry of Health, in his Report for 1952, states that, "the total numbers of School Children re-vaccinated over the whole country suggest that not more than 1 in 25 of the children, entering or leaving school, who had been primarily vaccinated in infancy, were re-vaccinated".

For all these reasons, the re-vaccination of school children should be encouraged.

It is unfortunately something of a paradox that the application of preventive measures, so easily and fully available, should in a great many instances have to await the occurrence of the very condition they are designed to prevent before advantage is taken of them.

During the year, 258 vaccinations against smallpox were carried out:-

Vaccination.	Pre-school children.	School Children.	Over 15 years of age.
Primary	185	7	11
Revaccination	2	13	40
TOTALS	187	20	51

In this district, the percentage of children under the age of one year, who were vaccinated in 1954, was 54.9%.

International Travel.

The increasing speed of travel by air and sea introduces an increased risk of importing travel-borne disease and, without returning to the health control measures enforced in the old Quarantine Acts, it is not possible to provide an absolute barrier to these occurrences.

Since the International Sanitary Regulations, 1952, came into operation, there is no distinction in the health control of air travellers and others, except where travel to and from yellow fever areas is concerned.

International travellers, who may have been contacts of smallpox or other dangerous diseases while out of this country, are required to show their doctors notices, issued to them on arrival at airports, in the event of their becoming ill during the succeeding twenty-one days.

International Travel (continued).

Passengers, undertaking international travel, must be in possession of certain vaccination certificates depending upon the place of departure, the countries of transit and the destination. International Certificates are issued in connection with smallpox, yellow fever and cholera.

The vaccinations must be recorded on the international vaccination certificate form prescribed by the World Health Organisation, dated and signed by the doctor doing the inoculation and, in the case of smallpox and cholera, authenticated and stamped by the Health Department of the district.

The international certificate forms should be obtained by the traveller himself from the Government Health Department concerned (i.e. Ministry of Health) or from travel agencies, airlines or shipping companies - except in the case of yellow fever which are held at certain recognised centres where the vaccination is performed.

In this area, yellow fever vaccinations are carried out at the Royal South Hants and Southampton Hospital, Fanshaw Street, Southampton.

Details of immunisation requirements can be obtained from the airline or steamship company concerned or from the consulates of the countries to be visited.

Diphtheria Immunisation.

The following information has been extracted from reports of the Ministry of Health and pamphlets issued by the Central Council for Health Education:

"The incidence and mortality from diphtheria continue to fall.

In the past ten years, the number of cases has fallen from 18,596 to 182 and the number of deaths from 722 to 9. The number of deaths from diphtheria in 1953 were only 23 and now a still lower record (i.e. 9 deaths in 1954) has been established.

This is a truly magnificent achievement and the claims made for the value of immunisation have been substantiated.

In a recent epidemic of diphtheria in the Midlands, thirty-eight cases occurred. Of these, three died and none of these had been immunised.

This example emphasises the fact that only if an adequate level of immunisation is maintained can this country be rid of diphtheria altogether.

The great majority of parents now-a-days have never seen or heard of a case of diphtheria among their neighbours' children and are more afraid of illnesses they know than of the dangers of diphtheria.

If parents leave their children unprotected, there may well be other outbreaks.

Complacency, resulting from what has already been achieved, or loss of interest or of confidence in immunisation, may mean that diphtheria will go on occurring endemically and epidemically in this country indefinitely, with the ever present risk of a return to high mortality; but a vigorously continued immunisation programme, combined with existing methods of epidemic control, may free us entirely from the disease except for the occasionally imported case".

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Diphtheria Immunisation (continued).

The Ministry of Health recommends that all children should be immunised before their first birthday - preferably at the age of seven or eight months and that they should receive a "booster" or re-inforcing dose just before entering school, and again every four or five years throughout school life.

Owing to the fact that immunity against diphtheria takes several weeks to develop, those who have been inoculated earlier in life will have the advantage of receiving protection against diphtheria at short notice.

It is, therefore, of the utmost importance for parents to realise that active immunisation in the first year of life and re-inforcing doses of prophylactic in later years are just as necessary in the absence of diphtheria epidemics as in their presence.

Immunisation helps the body to build up natural defences against the disease and gives almost certain protection against death from diphtheria.

Resistance to diphtheria is rather like a car battery that needs topping-up to maintain its full efficiency. So children should be immunised in the first year of life and have their first "topping-up" before reaching school age.

The object of publicity campaigns in the fight against diphtheria is to secure that at least 75% of the babies are immunised before the end of the first year of life.

The figure for the first half of 1954 in England and Wales is estimated to be 35.75 per cent, while, in this district 41.2 per cent of the children, born during the year 1953, were immunised before they attained the age of one year.

During the year, five hundred and thirty-one immunisations against diphtheria were carried out:-

Immunisation.	Pre-School Children.	School Children.
Primary	178	5
Re-inforcing or "Boosters"	20	328
TOTALS	198	333

Parents are reminded of the facilities for the immunisation of their children:-

1. By their own doctors.
2. At the following Child Welfare Clinics -
 - (a) Within the District -
Clanfield, Horndean, Liphook, Liss and Rowlands Castle.
 - (b) In the adjoining Districts -
Alton, Grayshott, Headley, Petersfield, Waterlooville and Stockheath.

Scabies.

Facilities for the treatment of Scabies are available at Portsmouth Disinfestation Clinic.

Appointments for cases requiring treatment are made through this Department.

Scabies should be regarded as a family infection; and all members of the same family should present themselves for treatment simultaneously - whether or not they complain of "The Itch" and show evidence of Scabies at the time. Otherwise an early case may escape detection and the parasite may thrive in one member and re-infect the others.

Pediculosis.

Cases of Pediculosis (head lice) may be referred for treatment at the Cleansing Clinic, County Council Health Centre, Ramshill, Petersfield, by appointment.

Pediculosis should also be regarded as a family infection; and, when a child is found to be verminous, all the members of the family should offer themselves for examination. This wise practice would ensure that any undetected case in the same family would receive immediate treatment and that there would be no further spread of infection to others.

Tuberculosis.

The total number of cases on the register on the 31st December, 1954 was one hundred and eighty seven. Of the nineteen additions to the Register during the year, ten were transferred to this area from other districts.

The following table gives the number of cases of Tuberculosis registered in the Rural District at the beginning and end of 1954:-

	Respiratory			Non-Respiratory		
	M	F	Total	M	F	Total
Number on Register at the beginning of the year (1954) (amended figures).	74	51	125	19	28	47
New additions to the Register during the year.	7	9	16	2	1	3
Removals from the Register during the year.	2	2	4	-	-	-
Number on Register at the end of the year (1954)	79	58	137	21	29	50

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Analysis of new cases and deaths according to age groups:-

	New Cases. (including transfers)				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0 - 1	-	-	-	-	-	-	-	-
1 - 5	-	1	1	-	-	-	-	-
5 - 15	-	1	1	-	-	-	-	-
15 - 25	2	3	-	-	-	-	-	-
25 - 35	3	2	-	1	-	-	-	-
35 - 45	-	2	-	-	-	-	-	-
45 - 55	2	-	-	-	1	-	-	-
55 - 75	-	-	-	-	-	-	-	-
TOTALS	7	9	2	1	1	-	-	-

Analysis of removals from the Register:-

Removals	Respiratory			Non-Respiratory.		
	M	F	Total	M	F	Total
Recoveries	-	-	-	-	-	-
Deaths	1	-	1	-	-	-
Transfers	1	2	3	-	-	-
TOTALS	2	2	4	-	-	-

No action was taken in 1954 under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from Pulmonary Tuberculosis employed in the milk trade) or Section 172 of the Public Health Act, 1936 (relating to compulsory removal to hospital of persons suffering from Tuberculosis).

National Assistance Act, 1948.

It is satisfactory to report that no official action was taken under Section 47 of the National Assistance Act, 1948, during the year in connection with the removal to hospital of persons who, owing to grave chronic disease, or being aged, infirm or physically incapacitated and living in insanitary conditions, were unable to devote to themselves and were not receiving from other persons proper care and attention.

A certain number of other cases, brought to the notice of this department, were investigated; but these were referred to the Area Welfare Officer, who was able to make other arrangements.

The assistance given by the Welfare Officer, Sanitary Inspectors, Health Visitors and voluntary organisations, is greatly appreciated in these difficult and distressing cases.

RURAL DISTRICT COUNCIL OF PETERSFIELD.

Public Health Department,
The Old College,
Petersfield.

To the Chairman and Members
of the Petersfield Rural District Council.

I beg to submit my Annual Report for the year 1954 on the sanitary circumstances of the area and the duties for which I am responsible.

There was a further marked improvement in the domestic water supplies although the number of houses served by wells is still a matter of some concern.

The deterioration of property during the war was a comparatively slow process and I think few people realised just how low a standard had been reached both from a maintenance point of view and as far as general appearance was concerned.

I think the last year or two has made it evident however, for in some districts, "doing the house up" became quite infectious, and there was a marked improvement in the general appearance of several of the villages in the district.

It seems to me that there is a link between this wholesome state of affairs and the pride of the occupants from a personal, domestic and community point of view.

For varying reasons, it has not been practicable, or desirable to deal with some groups of houses and these must await the provision of main drainage schemes, the operation of the Housing Acts and the possible alteration of property values because of changed circumstances.

The Council continued its policy regarding improvement grants, but as the number of applications towards the end of the year increased, it became apparent that some form of rationing would be necessary.

Apart from agricultural properties, many of the applicants so far, have been owner/occupiers intent on improving their properties by the addition of desirable amenities and it will be interesting to see if this trend continues or whether owners of tenanted properties will take advantage of the scheme.

Although there was a slight increase in the number of moveable dwellings in the district, they do not present such a problem as in some areas.

I would like to thank my colleagues in this office and in other departments of the Council for helping in producing this report.

A. SWAN.
Chief Sanitary Inspector.

SANITARY CIRCUMSTANCES OF THE AREA.

Water.

There was no evidence of any main water shortage during the year. Results of routine bacteriological examinations were satisfactory. All main supplies are chlorinated.

The Water Undertakers of the Rural District are:-

- (a) The Portsmouth and Gosport Water Company, 26 Commercial Road, Portsmouth, which supplies the parishes of Clanfield, Horndean and Rowlands Castle, and
- (b) The Wey Valley Water Company, Hindhead, Surrey. This Company now supplies the remaining parishes.

Wherever possible we have persuaded owners of houses with unsatisfactory water supplies either to (a) connect to a supply of water in pipes provided by the statutory undertakers or (b) take water into the houses by means of pipes.

In most cases where a main supply has been provided we have been successful in getting taps provided indoors over sinks and the necessary drainage systems provided.

In some cases, however, where main drainage is anticipated within a reasonable period, and the nature of the soil renders cesspool or similar drainage unsatisfactory, we have been prepared to accept standpipes in the yards or gardens. These will be subject to review in a few years time.

The properties in the district which have not a piped supply of water indoors are summarised as follows:-

- 154 dwellings have stored rainwater.
- 160 dwellings have wells from which water is drawn by a bucket or pump in the garden.
- 297 dwellings have main supply which is drawn from standpipes in the garden.
- 3 dwellings obtain their water from springs.

Copies of reports on samples taken from water mains were sent to the water companies concerned.

Bewerage and Sewage Disposal.

The extension of Liss sewage disposal works was completed in July, 1955. The increase in the population of this parish in the last two decades had made the extension necessary, and the works are now equipped to cater for any reasonable expansion of the population over a large number of years.

The Buriton scheme has been submitted to the Minister and the Hampshire County Council and a decision is expected in the near future.

A gravity scheme for the sewerage of parts of the parish of Greatham was submitted to the Minister, but on technical grounds he preferred the pumping scheme which was prepared in 1949, but which was not executed because of the national restrictions on capital expenditure. The pumping scheme, subject to small modifications, has recently been re-submitted to the Minister and his decision is awaited.

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Sewerage and Sewage Disposal (continued).

The Council's scheme for installing main drainage at East Meon was submitted to the Minister in August, 1954. An Engineering Inspector visited the District in July, 1955, and the Minister's decision is expected shortly.

The construction of a small but useful sewer extension at Rosehill Lane, Lovedean, to serve 6 properties, was completed in April, 1955.

Consulting Engineers have been engaged and they are preparing a report upon the Bramshottsewage works for submission to the Council. The report is likely to be ready shortly.

(Information under the heading is not confined to 1954, but is up to date at the time of producing this report).

Rivers and Streams.

The main rivers and streams are as follows:-

- (1) The River Wey, which passes through Bramshott Parish, and collects the discharge of water from Waggoners Wells.
- (2) The River Rother, which passes through the Parishes of Greatham and Liss.
- (3) The River Meon, which flows through the Parish of East Meon, and passes into Droxford Rural District at West Meon. (As a result of extensive flooding, some alteration to the course will be made during 1955).

The district resolves itself into three separate drainage areas:-

(a) West Sussex River Board Area:-

Parish of Steep.
Part of the Parish of Liss.
Major part of the Parish of Langrish.
Major part of the Parish of Hawkley.
Parish of Greatham.
Part of the Parish of Froxfield.
Small part of the Parish of East Meon.
Part of the Parish of Colemore and Priorsdean.
Northern part of the Parish of Buriton.

(b) Thames above Teddington Area:-

Parish of Bramshott.
Small part of the Parish of Hawkley.
Part of the Parish of Colemore and Priorsdean.
Part of the Parish of Froxfield.
Small part of the Parish of Liss.

(c) Hampshire River Board Area:-

Southern part of the Parish of Buriton.
Parish of Clanfield.
Part of the Parish of Froxfield.
Parish of Horndean.
Small part of the Parish of Langrish.
Parish of Rowlands Castle.
Major part of the Parish of East Meon.

Rainfall.

Captain A. F. Coryton has been good enough to let me have the following figures for 1954. The average fall for a year is 34".

January	1.58 inches.	July	2.76 inches.
February	2.92 inches.	August	3.25 inches.
March	3.39 inches.	September	3.42 inches.
April	.27 inches.	October	3.25 inches.
May	3.16 inches.	November	6.54 inches.
June	3.54 inches.	December	3.24 inches.

Total for the year: 37.32 inches.

Night Soil Collection.

Pail closet contents are emptied once weekly from Ramsdean and twice weekly in parts of the following parishes:-

Liss.	Langrish.
Bramshott.	Froxfield.
East Meon.	Clanfield.
Buriton.	

Public Cleansing.

The County Council carries out the cleansing of the roads in the district.

A collection of house refuse is now carried out in localities defined on maps approved by the Council. The collection days are as follows:-

Bramshott.	Weekly	Monday, Tuesday and Friday.
Buriton.	Fortnightly	Friday.
Clanfield.	Weekly	Wednesday.
Colemore and Priorsdean.	Fortnightly	Thursday.
East Meon.	Fortnightly	Thursday.
Froxfield.	Fortnightly	Thursday.
Greatham.	Fortnightly	Friday.
Hawkley.	Fortnightly	Friday.
Horndean.	Weekly	Tuesday.
Langrish.	Fortnightly	Thursday.
Liss.	Weekly	Wednesday and Thursday.
Rowlands Castle.	Weekly	Monday.
Steep.	Fortnightly	Friday.

Shops.

Inspections of shops were carried out in conjunction with visits to the premises under other statutes.

Moveable Dwellings.

There are three licensed sites in the district and eighty licences were issued in respect of individual moveable dwellings. Thirteen of these were new applications. Three applications were refused.

The number of moveable dwellings and the number of fresh applications varies little from last year.

Hop Pickers' Accommodation.

A satisfactory standard was maintained at the hop pickers camps during the season. It is anticipated that the new byelaws will be in force by next season.

Rural Schools.

Periodic visits were made to schools in the district in connection with sanitary accommodation, washing facilities and food preparation.

The attention of the County Council was drawn to a number of points.

Insect Infestation.

During the year a number of requests for assistance were received to deal with the usual infestations.

Routine anti-mosquito measures were carried out.

INSPECTIONS AND VISITS.

Totals.

Accumulations	11
Bakehouses	26
Building Bye-laws	4
Cafés	40
Cesspools	46
Civil Defence	9
Dairies	140
Disinfection of Premises	5
Drains Inspected	216
Drains Tested	17
Factories	39
Food Preparing Premises	201
Food Vans	1
Hop-pickers' Camps	17
Houses (Public Health and Housing Acts)	84
Houses (Operation Rescue)	60
Houses (Improvement Grants)	823
Houses (Works in progress)	396
Housing applications	24
Ice Cream	10
Infectious Disease	16
Insect Infestations	1
Keeping of Animals	14
Knackers Yards	28
Licensed Premises	12
Meat Inspection	101
Meat Shops	57
Miscellaneous	118
Mosquito Control	5
Moveable Dwellings	297
National Assistance Act, 1946	11
Nuisances	92
Offensive Trades	4
Piggeries	13
Places of Public Entertainment	2
Rodent Control	226
Schools	28
Shops	11
Slaughter-houses	71
Unsound Food	19
Verminous or dirty premises	13
Verminous premises disinfested	2
Verminous persons	2
Water supply	256
Workplaces	1
 TOTAL	 3569

Samples submitted for laboratory examination:-

Water	59
Milk	72
Milk bottles (for sterility) ..	46
Sewage effluent	<u>2</u>
TOTAL	<u>179</u>

H O U S I N G.

Provision of New Houses.

The following thirty-six new Council houses were erected between the 1st April, 1954 and the 31st December, 1954.

Houses -

- Gunns Farm, Bramshott.
Numbers 11, 12, 13, 14, 15, 16, 17, and 18.
- The Close, Gunns Farm, Bramshott.
Numbers 75, 76, 77 and 78.
- Glenthorne Meadow, East Meon.
Numbers 3, 4, 15 and 16.
- Bakersfield, Greatham.
Numbers 11, 12, 15 and 16.

Bungalows -

- Rodney Way, Horndean.
Numbers 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11 and 12.

Flats -

- Uplands Road, Rowlands Castle.
Numbers 43A, 43B, 45A and 45B

During the year, seventy-seven houses were built by private enterprise.

Summary of work carried out under Public Health and Housing Acts.

1. Inspection of dwelling houses during the year -

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	84
(b) Number of inspections made for the purpose	396
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	67
(b) Number of inspections made for the purpose	82
(3) Number of dwelling-houses found to be unfit for human habitation and not capable at reasonable expense of being rendered so fit	3
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be, in all respects, fit for human habitation ..	57

Summary of work carried out under Public Health and Housing Acts. (continued)

2. Remedy of Defects during the year without service of formal notices -

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers 61

3. Action under Statutory Powers during the year -

(a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 -

(1) Number of dwelling-houses in respect of which Notices were served requiring repairs Nil

(2) Number of dwelling-houses which were rendered fit after service of formal notices -

(a) By owners Nil

(b) By Local Authority in default of owners Nil

(b) Proceedings under Public Health Acts -

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 3

(2) Number of dwelling-houses in which defects were remedied after service of formal notices -

(a) By owners 8

(b) By Local Authority in default of owners Nil

(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936. -

(1) Number of dwelling-houses in respect of which Demolition Orders were made 3

(2) Number of dwelling-houses demolished in pursuance of Demolition Orders.. .. . 6

(3) Number of dwelling-houses closed in pursuance of an undertaking given by the owner under Section 11 .. Nil

4. Overcrowding -

No statutory action was taken during the year regarding overcrowding.

Repair of Houses.

The information in "Houses - The Next Step", presented by the Minister of Housing and Local Government to Parliament in November, 1953, and the various provisions of the Housing Repairs and Rents Bill were borne in mind up to the passing of the Act of the same name on the 30th July, 1954.

The biggest problem was, of course, to prepare the proposals required by the Minister, under Section 1 of that Act, for dealing with houses unfit for human habitation, but in the meantime, the request to "get on with the job" was complied with as far as practicable.

Repair of Houses (continued).

Most of the houses dealt with by demolition action were empty or were occupied by persons on the Council's Housing list. Co-operation with the Housing Manager prevented unfit houses becoming permanent "passports" to new accommodation.

As soon as the current survey of houses falling within Categories 4 and 5 of the Rural Housing Survey is complete, it is intended to prepare a report to the Council linked with the new building proposals so that a five year programme can be considered.

The anticipated rush for "Certificates of Disrepair" did not materialise and, in spite of several enquiries, no such certificates had been issued by the end of the year.

The cost of house maintenance showed no evidence of decreasing, but in spite of this, builders appeared to be working to the capacity of the building labour force. In this connection, it is interesting to note that, while there are now more building firms in the area than before the War, the labour force available to the public is estimated to have decreased by about one third. Whether or not a shortage of building labour has any effect on ruling prices is a matter of speculation.

The number of enquiries about improvement grants increased noticeably, particularly towards the end of the year.

Grants amounting to £11,979 were made in respect of 49 properties, the total cost of work being £26,629.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

Supervision and control of distributors and retail dairies was maintained throughout the year; there are twelve distributors of milk on this Council's register. A satisfactory standard was maintained.

Of the forty-six samples taken, eight failed to pass the required test.

There are two dairies in the district where pasteurisation is carried out and these are supervised under powers delegated by the County Council.

Liaison with the Area Milk Officer was maintained.

Licences issued under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 -

Dealer's Licences to use the designation "Pasteurised" ..	11
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Dealer's Licences to use the designation "Sterilised" ..	1
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Supplementary Licences to use the designation "Pasteurised"	8
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Supplementary Licences to use the designation "Sterilised"	3
---	---

Licences issued under the Milk (Special Designation) (Raw Milk) Regulations, 1949 -

Dealer's Licences to use the designation "Tuberculin Tested"	8
---	---

Supplementary Licences to use the designation "Tuberculin Tested"	8
--	---

Meat and other Foods.

Wartime restrictions on the slaughter of animals for food were finally lifted in July, 1954 and at the same time meat came off ration for the first time since controls were imposed.

The normal peacetime restrictions controlling slaughtering practice remained in force and were supplemented during the year.

The Government's policy of moderate concentration of slaughtering was automatically followed both in this district and in the adjoining urban area. The latter licensed only the slaughterhouse formerly used by the Contractors to the Ministry of Food and in this area only three licences were authorised in respect of slaughterhouses run in conjunction with individual butchers retail businesses. The remaining butchers obtain their supplies from wholesale suppliers.

Section 14 of the Food and Drugs Act, 1938, provides for the registration of all premises used for:-

- (a) the sale, or manufacture for the purpose of sale of ice cream, or the storage of ice cream intended for sale; or
- (b) the preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale.

There are sixty-two entries in this Council's register in respect of ice cream premises and fourteen in respect of preserved food premises.

Meat Inspection.

The following carcasses were examined during the period 1st July, 1954 to 31st December, 1954:-

Cattle (excluding cows)	130.
Cows	27.
Sheep	226.
Pigs	261.
Calves	<u>45.</u>
TOTAL	<u>689.</u>

Meat condemned as a result of these examinations:-

- 1 carcase of beef (cow) and all organs.
- 11 bovine heads and tongues.
- 8 bovine lungs.
- 1 part bovine lung.
- 25 bovine livers.
- 4 parts bovine livers.
- 2 carcasses of pork and all organs.
- 4 pigs' heads.
- 1 part pig's head.
- 3 pigs' lungs.
- 1 pig's liver.
- 1 leg of mutton.
- 4 sheeps' lungs.
- 3 sheeps' livers.

Total weight of meat condemned:- 11 cwts. 3 qtrs. 6 lbs.

Details of other condemned food: -

	lbs.
Home killed beef	108
Bovine kidney.	13
Imported beef.	84
Imported bovine liver.	31
Home killed pork.	38
Pressed beef.	42
Corned beef.	4
Kippers.	28
Sardines.	1
Tomatoes.	5
Cheese.	20
Peas.	1
Apricots.	2
Plums.	1
Condensed milk.	2
	<u>380</u>

Adulterations.

The Hampshire County Council is the Food and Drugs Authority and is responsible for the administration of the Sections of the Food and Drugs Act, 1938 which place restrictions on the addition to, or abstraction of substances from, food and drugs.

I am indebted to Mr. C.O. Perry, Chief Inspector under the Food and Drugs Act, for the following information on samples taken in the district during the year:-

Article.	Number of samples taken.	
	<u>Genuine.</u>	<u>Unsatisfactory.</u>
Butter and Other Fats	3	-
Drugs	2	-
Milk	71	-
Meat Products	5	-
Spirits	5	-
Other foods	<u>7</u>	<u>-</u>
TOTALS	<u>93</u>	<u>-</u>

The seventy-one samples of milk proved to contain an average of 3.78% fat and 8.76% non fatty solids.

RODENT CONTROL.

It was not found necessary to serve any statutory notices during the year under the Prevention of Damage by Pests Act, 1949 and I think this says much for the tact and understanding of the operators.

In general, control measures during the year were satisfactory.

As a result of the Hampshire Agricultural Executive Committee discontinuing their service for the destruction of rats and mice, the Council decided to treat at farms upon request on an "ad hoc" basis.

There was a marked increase in infestation during the last quarter of the year and it was difficult to cope with the demand for the operators' services. The problem was not only a local one and was attributed to:-

- (a) A wet summer.
- (b) A late harvest.
- (c) Incomplete harvesting by combines.
- (d) Myxomatosis.

The following table gives details of inspections and treatments for the period 1st April, 1954 to the 31st March, 1955.

	Type of Property				
	Local Authority	Dwelling Houses	All other (including business premises)	Total of Cols (1) (2) and (3)	Agricultural
	(1)	(2)	(3)	(4)	(5)
1. Number of properties in Local Authority's District	18	5883	455	6356	278
2. Number of properties inspected as a result of:-					
(a) Notification	2	164	25	191	32
(b) Survey under the Act	11	1074	49	1134	246
(c) Otherwise (when visited primarily for some other purpose.)	15	106	48	169	55
3. Total inspections carried out, including re-inspections	28	1672	87	1787	445
4. Number of properties inspected which were found to be infested by:					
(a) Rats { Major	3	227	16	246	93
{ Minor	3	455	23	481	26
(b) Mice { Major	-	-	1	1	-
{ Minor	-	21	6	27	1
5. Number of infested properties (in 4 above) treated by the L.A.	6	697	38	741	85
6. Number of notices served under Section 4 of the Act.					
(a) Treatment	-	-	-	-	1
(b) Structural Work	-	-	-	-	-
7. Number of "Block" control schemes carried out.	34				

N.B. -

Local Authority's Properties. Council houses are included under Dwelling Houses. Premises occupied in connection with the Council's undertakings are included under this heading.

Combined Dwelling and Business Premises occupied by the same person are included under Business Premises.

Farms, Smallholdings, Poultry Farms and other premises devoted to commercial, agriculture or horticulture are included under Agricultural Property and not under Business Premises.

continued over/.....

Unclassified Properties. Properties which do not appropriately fall under other classifications are included under Business Premises.

Degree of Infestation. "Major" includes only properties with an estimated rat population exceeding twenty rats.

Treatment means a complete operation for the destruction of rats or mice in the property.

FACTORIES.

Mr. S.H. Carter is H.M. Inspector of Factories for the Portsmouth District, which includes the Petersfield Rural District. His address is 9 Western Parade, Southsea.

Inspections for purposes as to health:--

Premises.	Number on Register	Inspections	Number of written Notices.
(1) Factories in which sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	3	3	-
(2) Factories not included in (1) in which section 7 is enforced by the Local Authority	57	36	1
(3) Other Premises in which Section 7 is enforced by the Local Authority	-	-	-
TOTALS	60	39	1